

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|---------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>B</i> | <i>JC 873</i> | <i>04-02-01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 1/17/01 |
| 2 | ✓ | ✓ | 1/20/01 |
| 3 | ✓ | ✓ | 1/20/01 |
| 4 | N | N | |
| 5 | N | N | |
| 6 | ✓ | ✓ | |
| 7 | ✓ | ✓ | |
| 8 | ✓ | ✓ | |
| 9 | ✓ | ✓ | |
| 10 | ✓ | ✓ | |
| 11 | N | N | |
| 12 | ✓ | ✓ | |
| 13 | ✓ | ✓ | |
| 14 | ✓ | ✓ | |
| 15 | ✓ | ✓ | |
| 16 | N | N | |
| 17 | N | N | |
| 18 | N | N | |
| 19 | N | N | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here